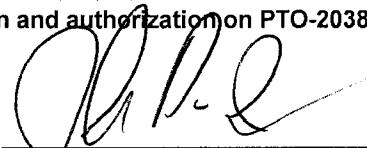


<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 62130-0031										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">In re Application of Dirk ESSER, et al.</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Application Number 10/526,808 Filed June 8, 2005</td> </tr> <tr> <td colspan="2" style="padding: 5px;">For MODIFIED THERAPEUTIC AGENTS</td> </tr> <tr> <td style="padding: 5px;">Group Art Unit 1654</td> <td style="padding: 5px;">Examiner Cordero Garcia, M.</td> </tr> </table>			In re Application of Dirk ESSER, et al.		Application Number 10/526,808 Filed June 8, 2005		For MODIFIED THERAPEUTIC AGENTS		Group Art Unit 1654	Examiner Cordero Garcia, M.		
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="width: 30%; text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;"><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right; padding: 5px;">\$460.00</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right; padding: 5px;">\$ _____</td> </tr> </table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$ 230.00</u> .</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-3840</u> .</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p style="margin-left: 20px;">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p style="margin-left: 20px;">Registration number if acting under 37 CFR 1.34(a). _____.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p style="text-align: center; margin-top: 20px;">           December 19, 2007          Date          Signature          John P. Isacson, Reg. No. 33,715          Typed or printed name       </p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
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<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____											
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>												